

OFFICE OF FINANCIAL AND INSURANCE REGULATION JOB VACANCY NOTICE

CLASS/LEVEL: Departmental Specialist 13
DIVISION/SECTION: Supervisory Affairs Division
DEADLINE TO RESPOND: 12-2-08

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 INTERESTED APPLICANTS SHOULD SUBMIT A RESUME, COVER LETTER, DLEG APPLICATION AND COPY OF COLLEGE TRANSCRIPTS (INTERNET BASED TRANSCRIPTS ARE NOT ACCEPTED) TO DLEG, OFFICE OF FINANCIAL AND INSURANCE REGULATION, HUMAN RESOURCES/BUDGET DIVISION/OFIR 08-74, P.O. BOX 30220, LANSING, MICHIGAN 48909 OR FAX TO (517) 335-1450 BY THE DEADLINE DATE.

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| COUNTY/LOCATION         | Ingham/Lansing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                 |
| PAY RANGE               | \$21.99-\$32.82/hour                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                 |
| DESCRIPTION OF POSITION | This position has sole responsibility for administering a statewide program for the oversight, review and regulation of certificates of coverage (COC), riders, consumer grievance policies and procedures, and member handbooks filed by health maintenance organizations (HMOs) holding certificates of authority to do business in Michigan. This position requires very specific, extensive knowledge of the Michigan Insurance Code, Michigan Medicaid managed care requirements, and applicable federal statute in order to effectively administer the program. The person in this position has responsibility for preparing letters for the Deputy Commissioner informing the HMO if their COC's, riders and consumer grievance policies and procedures are approved or denied. |                                                                                                                                 |
| EDUCATION               | Possession of a bachelor's degree in any major.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                 |
| EXPERIENCE              | Four years of professional business and administrative experience, including two years equivalent to the experienced (P11) level or one year equivalent to the advanced (12) level.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                 |
| SPECIAL REQUIREMENTS    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                 |
| RESPOND TO              | Posting No.:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | OFIR 08-74                                                                                                                      |
|                         | Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DLEG, Office of Financial & Insurance Regulation, Human Resources/Budget Division/OFIR08-74, P. O. Box 30220, Lansing, MI 48909 |
|                         | E-Mail Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                 |
|                         | Fax:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | (517) 335-1450                                                                                                                  |

and pass a pre-employment drug test as a condition of employment

**This is an announcement of a position vacancy and does not constitute an offer of employment.**

**State of Michigan**  
**Department of Civil Service**  
Capitol Commons Center, P.O. Box 30002  
Lansing, MI 48909

Federal privacy laws and/or state  
confidentiality requirements protect  
a portion of this information.

**POSITION DESCRIPTION**

This form is to be completed by the person that occupies the position being described and reviewed by the supervisor and appointing authority to ensure its accuracy. It is important that each of the parties sign and date the form. If the position is vacant, the supervisor and appointing authority should complete the form.

This form will serve as the official classification document of record for this position. Please take the time to complete this form as accurately as you can since the information in this form is used to determine the proper classification of the position. **THE SUPERVISOR AND/OR APPOINTING AUTHORITY SHOULD COMPLETE THIS PAGE.**

|                                                                                                                                                |                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <b>2. Employee's Name (Last, First, M.I.)</b><br>VACANT                                                                                        | <b>8. Department/Agency</b><br>LABOR & ECONOMIC GROWTH                                                                        |
| <b>3. Employee Identification Number</b>                                                                                                       | <b>9. Bureau (Institution, Board, or Commission)</b><br>OFFICE OF FINANCIAL AND INSURANCE<br>REGULATION                       |
| <b>4. Civil Service Classification of Position</b><br>DEPARTMENTAL SPECIALIST 13                                                               | <b>10. Division</b><br>SUPERVISORY AFFAIRS                                                                                    |
| <b>5. Working Title of Position (What the agency titles the position)</b><br>REGULATORY SPECIALIST                                             | <b>11. Section</b>                                                                                                            |
| <b>6. Name and Classification of Direct Supervisor</b><br>JOHN D. GARDNER, DEPARTMENT DIVISION<br>ADMINSTRATOR 15                              | <b>12. Unit</b><br>MANAGED CARE MARKET REGULATION                                                                             |
| <b>7. Name and Classification of Next Higher Level Supervisor</b><br>JUDITH A. WEAVER, DEPUTY COMMISSIONER,<br>STATE DIVISION ADMINISTRATOR 17 | <b>13. Work Location (City and Address)/Hours of Work</b><br>611 W. OTTAWA, LANSING 8:00 A.M. - 5:00 P.M.,<br>MONDAY - FRIDAY |

**14. General Summary of Function/Purpose of Position**

This position has sole responsibility for administering a statewide program for the oversight, review and regulation of certificates of coverage (COC), riders, consumer grievance policies and procedures, and member handbooks filed by health maintenance organizations (HMOs) holding certificates of authority to do business in Michigan. This position requires very specific, extensive knowledge of the Michigan Insurance Code, Michigan Medicaid managed care requirements, and applicable federal statute in order to effectively administer the program. The person in this position has responsibility for preparing letters for the Deputy Commissioner informing the HMO if their COC's, riders and consumer grievance policies and procedures are approved or denied.

The position interprets highly complex laws, policies, and procedures with regard to the program. These interpretations have a substantial direct impact in Michigan consumers as they are directly used to approve COCs, riders, and consumer grievance policies and procedures and make final recommendations in this area of expertise.

**For Civil Service Use Only**

**15. Please describe your assigned duties, percent of time spent performing each duty, and explain what is done to complete each duty.**

**List your duties in the order of importance, from most important to least important. The total percentage of all duties performed must equal 100 percent.**

Duty 1

**General Summary of Duty 1**

**% of Time 70**

Solely responsible for the statewide program of review and analysis of benefit plan documents (COCs and riders) for all Michigan HMOs. This includes benefit plans offered and sold to groups and individuals in the commercial market as well as those offered through Medicaid HMOs. The review involves the careful reading of all documents to determine statutory compliance with applicable Michigan law. In addition, for HMOs serving Medicaid enrollees, this position is responsible for having familiarity with each HMO's contractual agreement with the State of Michigan.

**Individual tasks related to the duty.**

- Receives and reviews all COCs and riders filed by HMOs.
- Evaluates whether COCs and riders submitted for review by HMOs comply with applicable Michigan law, OFIR policies and practices, and provide appropriate consumer protections. .
- Contact HMOs regarding issues noted during the review of COCs and riders; conduct all needed follow-up with plan administrators and staff to clarify any outstanding issues.
- Make recommendations regarding the determination to approve or disapprove the filing and as appropriate draft OFIR's response notifying the HMO of the determination. Complete the review, make a recommendation and draft any correspondence in accordance with policies and procedures and within the required timeframe.
- As needed, researches issues concerning benefit coverage and the methods by which HMOs may administer mandated benefits.
- Act as OFIR's liaison for questions regarding HMO coverage documents.
- Keep apprised of requirements for HMO regulation found in both Michigan and federal law, as well as all requirements under the State of Michigan's contractual agreement with Medicaid HMOs.
- Keep current on Attorney General opinions, PRIRA cases, and relevant court decisions having a potential impact on HMO benefit plans.
- Prepare correspondence addressing issues raised by HMOs regarding COCs and riders.
- Participate in meetings with HMOs and/or other agencies to discuss issues involving HMO benefit plans.
- Keep current with state and federal trends with regards to "innovative" products in the HMO market.
- Make recommendations to management on necessary statutory changes.
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Duty 2

**General Summary of Duty 2**

**% of Time 10**

Act as technical advisor to department management, HMO officials, attorneys, HMO consumers, other consumer groups, federal, state, and local government agencies, legislators, and other interested parties in the implementation of this statewide program affecting HMO COCs and riders benefit documents.

**Individual tasks related to the duty.**

- Interpret existing state and applicable federal laws, policies and procedures as they are related to HMOs.
- Act as a technical advisor and liaison with industry, consumer groups, other OFIR divisions, and other governmental entities for these programs on coverage issues for HMOs.
- Act as a technical expert/consultant and liaison with the industry to discuss and design COCs and riders that are statutorily compliant.
- Notify HMOs of filings that are not compliant with applicable laws or other agency concerns.
- Serve as the Commissioner's representative as needed.
- Act as expert witness at hearings when HMOs may challenge determinations on coverage issues of the agency.

**Duty 3****General Summary of Duty 3****% of Time 10**

Other duties as assigned.

**Individual tasks related to the duty.**

- Development and research of data relating to HMO benefit design/and grievance procedures.
- Collect the necessary data from COCs and riders for program review and evaluation.
- Maintain relationship with other state departments to monitor program impact and ensure compatibility with requirements of other agencies. (An example would be the Department of Community Health in its role as administrator of the Medicaid program, which is available through HMOs.)
- Work with other Managed Care Market Regulation staff that also perform reviews on other aspects of HMOs operations to ensure the Division is completing a comprehensive and integrated review.
- Fulfill Freedom of Information Act requests for COCs, riders, grievance procedures and member handbooks and enrollee information.
- Perform special projects and assignments as directed by management.
- Research state and/or federal laws when necessary.
- Assist with policy determinations and application of new standards, such as National Committee for Quality Assurance (NCQA) and Joint Commission for Accreditation of Hospital Organizations (JCAHO).

**Duty 4****General Summary of Duty 4****% of Time 10**

Solely responsible for the statewide program of review and analysis of all Michigan HMOs' (commercial and Medicaid) consumer grievance policies and procedures. The review involves the careful reading of all documents to determine statutory compliance with applicable Michigan law.

**Individual tasks related to the duty.**

- Receives and reviews all consumer grievance policies and procedures filed by HMOs.
- Evaluates whether consumer grievance policies and procedures submitted for review by HMOs comply with applicable Michigan law, OFIR policies and practices, and provide appropriate consumer protections. .
- Contact HMOs regarding issues noted during the review of consumer grievance policies and procedures; conduct all needed follow-up with plan administrators and staff to clarify any outstanding issues.
- Make recommendations regarding the determination to approve or disapprove the filing and as appropriate draft OFIR's response notifying the HMO of the determination. Complete the review, make a recommendation and draft any correspondence in accordance with policies and procedures and within the required timeframe.
- Act as OFIR's liaison for questions regarding consumer grievance policies and procedures.
- Keep apprised of requirements for HMO regulation found in both Michigan and federal law, as well as all requirements under the State of Michigan's contractual agreement with Medicaid HMOs.
- Keep current on Attorney General opinions, PRIRA cases, and relevant court decisions having a potential impact on HMO benefit plans.
- Prepare correspondence addressing issues raised by HMOs regarding consumer grievance policies and procedures.
- Participate in meetings with HMOs and/or other agencies to discuss issues involving HMO consumer grievance policies and procedures.
- • Make recommendations to management on necessary statutory changes.

Duty 5**General Summary of Duty 5****% of Time** \_\_\_\_\_**Individual tasks related to the duty.**

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Duty 6

General Summary of Duty 6

% of Time \_\_\_\_\_

**Individual tasks related to the duty.**

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- 16. Describe the types of decisions you make independently in your position and tell who and/or what is affected by those decisions. Use additional sheets, if necessary.**

Recommendations regarding approval or disapproval for filings of certificates of coverage (COC), riders, grievance procedures and member handbooks for all HMOs are made by the person in this position. The employee makes recommendations independently, but the recommendations are reviewed by the supervisor before they are given to the Deputy Commissioner of the Division. (By statute, approval or disapproval can only be made by the Commissioner or his/her designee.) These decisions have a significant direct impact on access to health care coverage for over two million Michigan citizens.

- 17. Describe the types of decisions that require your supervisor's review.**

HMOs sometimes file new, innovative coverage documents, member handbooks and grievance procedures which significantly differ from those which have been previously filed by regulated entities. These filings are reviewed and evaluated by the person in this position and the supervisor before a recommendation for approval or disapproval is made to the Deputy Commissioner of the Division.

- 18. What kind of physical effort do you use in your position? What environmental conditions are you physically exposed to in your position? Indicate the amount of time and intensity of each activity and condition. Refer to instructions on page 2.**

Much of the work is performed while sitting in front of a personal computer. This position also requires the employee to retrieve paper files on occasion. This task may involve stooping, kneeling, reaching and bending..

19. List the names and classification titles of classified employees whom you immediately supervise or oversee on a full-time, on-going basis. (If more than 10, list only classification titles and the number of employees in each classification.)

| <u>NAME</u> | <u>CLASS TITLE</u> | <u>NAME</u> | <u>CLASS TITLE</u> |
|-------------|--------------------|-------------|--------------------|
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20. My responsibility for the above-listed employees includes the following (check as many as apply):

- |                                                             |                                                            |
|-------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Complete and sign service ratings. | <input type="checkbox"/> Assign work.                      |
| <input type="checkbox"/> Provide formal written counseling. | <input type="checkbox"/> Approve work.                     |
| <input type="checkbox"/> Approve leave requests.            | <input type="checkbox"/> Review work.                      |
| <input type="checkbox"/> Approve time and attendance.       | <input type="checkbox"/> Provide guidance on work methods. |
| <input type="checkbox"/> Orally reprimand.                  | <input type="checkbox"/> Train employees in the work.      |

21. *I certify that the above answers are my own and are accurate and complete.*

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**NOTE: Make a copy of this form for your records.**

**TO BE COMPLETED BY DIRECT SUPERVISOR**

22. Do you agree with the responses from the employee for Items 1 through 20? If not, which items do you disagree with and why?  
Yes, I agree with the responses for items 1 through 20.



**23. What are the essential duties of this position?**

Analyzing, evaluating and recommending approval or disapproval of COCs, riders, and grievance procedures filed as part of HMO licensure applications and the statutory required ongoing monitoring of companies.

Analyzing, evaluating and recommending approval or disapproval of COCs, grievance procedures, riders and member handbooks filed by licensed HMOs as required by the Michigan Insurance Code.

Communicating and coordinating, as necessary, with other agencies, such as the Department of Community Health, and other divisions of the Office of Financial and Insurance Regulation, such as Health Plans Division, Office of General Counsel, and Market Conduct Division.

**24. Indicate specifically how the position's duties and responsibilities have changed since the position was last reviewed.**

No change, backfilling a vacancy

**25. What is the function of the work area and how does this position fit into that function?**

The Managed Care Market Regulation Section of the Division is responsible for the oversight of HMOs and AFDS non-financial operations. The individual in this position is responsible for being the Agency expert in reviewing COCs and riders submitted for approval by HMOs. This position reviews, analyzes, evaluates and recommends approval or disapproval of COCs, riders, consumer grievance and complaint procedures filed as part of the Michigan Insurance Code. This work area also responds to inquiries from the public and other agencies about the benefits filed by the entities and monitors the compliance of these entities with relevant statutes and administrative rules that relate to the HMOs.

**26. In your opinion, what are the minimum education and experience qualifications needed to perform the essential functions of this position.**

**EDUCATION:**

Possession of a bachelor's degree in any major.